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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at *www.irs.gov/form990pf*

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015 or tax year beginning , 2015, and ending , 20

Name of foundation

HAMILTON EUGENE B TRUST

A Employer identification number

01-6023382

Number and street (or P O box number if mail is not delivered to street address) | Room/suite

P O BOX 1802

B Telephone number (see instructions)

888-866-3275

City or town, state or province, country, and ZIP or foreign postal code

PROVIDENCE, RI 02901-1802

C If exemption application is pending, check here . . . . . ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1 Foreign organizations, check here . . ▶ ☐

2 Foreign organizations meeting the 85% test, check here and attach computation . . . . . ▶ ☐

H Check type of organization: ☐ Section 501(c)(3) exempt private foundation ☒ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here . ▶ ☐

I Fair market value of all assets at end of year (*from Part II, col. (c), line 16*) ▶ $ 134,003.

J Accounting method. ☒ Cash ☐ Accrual ☐ Other (specify)

(*Part I, column (d) must be on cash basis.*)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . ▶ ☐

ENVELOPE POSTMARK DATE NOV 14 2016

Part I Analysis of Revenue and Expenses (*The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)*)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc , received (attach schedule)				
2 Check ▶ ☒ if the foundation is **not** required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	3,078.	3,003.		STMT 1
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	2,038.			
b Gross sales price for all assets on line 6a 12,568.				
7 Capital gain net income (from Part IV, line 2)		2,038.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)		1.		STMT 2
12 **Total** Add lines 1 through 11	5,116.	5,042.		
13 Compensation of officers, directors, trustees, etc	2,472.	1,483.		989.
14 Other employee salaries and wages		NONE	NONE	
15 Pension plans, employee benefits		NONE	NONE	
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)				
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions) STMT 3	85.	85.		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings		NONE	NONE	
22 Printing and publications		NONE	NONE	
23 Other expenses (attach schedule) STMT 4	38.	71.		
24 **Total operating and administrative expenses** Add lines 13 through 23	2,595.	1,639.	NONE	989.
25 Contributions, gifts, grants paid	5,901.			5,901.
26 **Total expenses and disbursements** Add lines 24 and 25	8,496.	1,639.	NONE	6,890.
27 Subtract line 26 from line 12				
a **Excess of revenue over expenses and disbursements**	-3,380.			
b **Net investment income** (if negative, enter -0-)		3,403.		
c **Adjusted net income** (if negative, enter -0-)				

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	5,769.	8,496.	8,496.
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶ NONE			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U S and state government obligations (attach schedule)			
	b Investments - corporate stock (attach schedule) . STMT 5.	130,983.	125,078.	125,507.
	c Investments - corporate bonds (attach schedule)			
	11 Investments - land, buildings, and equipment basis ▶ Less accumulated depreciation ▶ (attach schedule)			
	12 Investments - mortgage loans			
	13 Investments - other (attach schedule) . . . . . STMT 6.			
	14 Land, buildings, and equipment basis ▶ Less accumulated depreciation ▶ (attach schedule)			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers - see the instructions Also, see page 1, item I)	136,752.	133,574.	134,003.
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)		NONE	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here . ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, ▶ ☒ check here and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	136,752.	133,574.	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	136,752.	133,574.	
	31 **Total liabilities and net assets/fund balances** (see instructions)	136,752.	133,574.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	136,752.
2	Enter amount from Part I, line 27a	2	-3,380.
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 7	3	1,889.
4	Add lines 1, 2, and 3	4	135,261.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 8	5	1,687.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	133,574.

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo., day, yr)
1a	PUBLICLY TRADED SECURITIES			
b	OTHER GAINS AND LOSSES			
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	3,184.		2,544.	640.
b	9,384.		7,986.	1,398.
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				640.
b				1,398.
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	2,038.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	7,098.	143,574.	0.049438
2013	6,018.	138,581.	0.043426
2012	6,787.	128,838.	0.052679
2011	7,751.	128,604.	0.060270
2010	4,983.	124,014.	0.040181

2	**Total** of line 1, column (d)	2	0.245994
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.049199
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	136,767.
5	Multiply line 4 by line 3	5	6,729.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	34.
7	Add lines 5 and 6	7	6,763.
8	Enter qualifying distributions from Part XII, line 4	8	6,890.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ [X] and enter 1% of Part I, line 27b	1	34.
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	34.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	NONE
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	34.
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015 — 6a		
b	Exempt foreign organizations - tax withheld at source — 6b: NONE		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 34.		
d	Backup withholding erroneously withheld — 6d		
7	Total credits and payments Add lines 6a through 6d	7	34.
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	**Tax due** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be **Credited to 2016 estimated tax** ▶ NONE **Refunded** ▶	11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		X
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ $ _____ (2) On foundation managers ▶ $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		X
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ ME			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If "No," attach explanation*	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ N/A

14 The books are in care of ▶ US TRUST FIDUCIARY TAX SERVICES Telephone no ▶ (888)866-3275
Located at ▶ PO BOX 1802, PROVIDENCE, RI ZIP+4 ▶ 02901

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** - Check here . . . ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the year . . . ▶ 15

			Yes	No
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶	16		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		☐	☒
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		☐	☒
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		☐	☒
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		☒	☐
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		☐	☒
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)		☐	☒
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ ☐	1b		X
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? If "Yes," list the years ▶ _____, _____, _____, _____		☐	☒
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ _____, _____, _____, _____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		☐	☒
b	If "Yes," did it have excess business holdings in 2015 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
	(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions)	☒ Yes ☐ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?	5b		X
	Organizations relying on a current notice regarding disaster assistance check here . . . . . ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . ☒ Yes ☐ No			
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . . ☐ Yes ☒ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		X
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? . . ☐ Yes ☒ No			
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BANK OF AMERICA, NA	TRUSTEE			
PO BOX 1802, PROVIDENCE, RI 02901	1	2,472.	-0-	-0-

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over $50,000 . . . . . ▶ NONE

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		NONE
Total number of others receiving over $50,000 for professional services ▶		NONE

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions 3 NONE	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:		
a	Average monthly fair market value of securities	1a	133,260.
b	Average of monthly cash balances	1b	5,590.
c	Fair market value of all other assets (see instructions)	1c	NONE
d	**Total** (add lines 1a, b, and c)	1d	138,850.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	138,850.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,083.
5	**Net value of noncharitable-use assets** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	136,767.
6	**Minimum investment return.** Enter 5% of line 5	6	6,838.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	6,838.
2a	Tax on investment income for 2015 from Part VI, line 5	2a	34.		
b	Income tax for 2015. (This does not include the tax from Part VI.)	2b			
c	Add lines 2a and 2b			2c	34.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	6,804.
4	Recoveries of amounts treated as qualifying distributions			4	197.
5	Add lines 3 and 4			5	7,001.
6	Deduction from distributable amount (see instructions)			6	NONE
7	**Distributable amount** as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1			7	7,001.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	6,890.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	6,890.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	34.
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	6,856.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				7,001.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			1,010.	
b Total for prior years 20 13 ,20 ,20		NONE		
3 Excess distributions carryover, if any, to 2015				
a From 2010 NONE				
b From 2011 NONE				
c From 2012 NONE				
d From 2013 NONE				
e From 2014 NONE				
f Total of lines 3a through e	NONE			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ $ 6,890.				
a Applied to 2014, but not more than line 2a			1,010.	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONE			
d Applied to 2015 distributable amount				5,880.
e Remaining amount distributed out of corpus	NONE			
5 Excess distributions carryover applied to 2015 (*If an amount appears in column (d), the same amount must be shown in column (a).*)	NONE			NONE
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b Prior years' undistributed income Subtract line 4b from line 2b		NONE		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				1,121.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	NONE			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	NONE			
9 **Excess distributions carryover to 2016.** Subtract lines 7 and 8 from line 6a	NONE			
10 Analysis of line 9				
a Excess from 2011 NONE				
b Excess from 2012 NONE				
c Excess from 2013 NONE				
d Excess from 2014 NONE				
e Excess from 2015 NONE				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling . . . . . ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed .					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets . . .					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test- enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . .					
c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942 (j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income .					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000). (See section 507(d)(2))

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed·

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines·

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors·

Part XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SEE STATEMENT 20				5,901.
Total . . . . . ▶ **3a**				5,901.
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	3,078.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	2,038.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				5,116.	
13 **Total** Add line 12, columns (b), (d), and (e)				13	5,116.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
	NOT APPLICABLE

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions.			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Sign Here

Karen J Hsu — 11/10/2016 — SVP Tax

Signature of officer or trustee — Date — Title

BANK OF AMERICA, N.A.

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
USGI REPORTED AS NONQUALIFIED DIVIDENDS	27.	27.
FOREIGN DIVIDENDS	564.	564.
NONDIVIDEND DISTRIBUTIONS	98.	
DOMESTIC DIVIDENDS	1,015.	1,015.
OTHER INTEREST	176.	176.
FOREIGN INTEREST	19.	19.
U.S. GOVERNMENT INTEREST(FEDERAL TAXABLE	44.	44.
NON-TAXABLE FOREIGN INCOME	-23.	
NONDISTRIBUTIVE FOREIGN DIVIDENDS	102.	102.
NONQUALIFIED FOREIGN DIVIDENDS	183.	183.
NONQUALIFIED DOMESTIC DIVIDENDS	873.	873.
TOTAL	3,078.	3,003.

FORM 990PF, PART I - OTHER INCOME

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
PARTNERSHIP INCOME		1.
TOTALS		1.

FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
FOREIGN TAXES	76.	76.
FOREIGN TAXES ON QUALIFIED FOR	6.	6.
FOREIGN TAXES ON NONQUALIFIED	3.	3.
TOTALS	85.	85.

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
OTHER ALLOCABLE EXPENSE-PRINCI	19.	19.
OTHER ALLOCABLE EXPENSE-INCOME	19.	19.
PARTNERSHIP EXPENSES		33.
TOTALS	38.	71.

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
202671913 AGGREGATE BOND CTF	10,458.	10,333.
1261291Q8 SMALL CAP CTF		
1261292H7 INTERNATIONAL EQUITY		
202670915 LARGE CAP VALUE QUAN		
29099J109 EMERGING MARKETS STO	8,406.	8,114.
302993993 MID CAP VALUE CTF	2,855.	3,265.
323991307 MID CAP GROWTH CTF	3,124.	3,400.
993360882 LARGE CAP GROWTH CTF		
464287507 ISHARES CORE S&P MID	3,193.	3,901.
464287655 ISHARES RUSSELL 2000	3,616.	4,054.
921943858 VANGUARD FTSE DEVELO	4,489.	4,443.
922042858 VANGUARD FTSE EMERGI		
922908553 VANGUARD REIT ETF	6,800.	8,132.
466001864 IVY ASSET STRATEGY F	7,481.	5,777.
693390841 PIMCO HIGH YIELD FD	1,389.	1,255.
714199106 PERMANENT PORTFOLIO		
72200Q182 PIMCO ALL ASSET ALL		
207543877 SMALL CAP GROWTH LEA	2,594.	2,969.
303995997 SMALL CAP VALUE CTF	2,553.	2,638.
45399C107 DIVIDEND INCOME COMM	11,691.	12,175.
99Z466163 HIGH QUALITY CORE CO	5,732.	6,180.
99Z466197 INTERNATIONAL FOCUSE	12,489.	13,337.
99Z501647 STRATEGIC GROWTH COM	10,135.	12,049.
73935S105 POWERSHARES DB COMMO	6,111.	3,126.
38145C646 GOLDMAN SACHS STRATE	10,266.	9,290.
464287200 ISHARES CORE S&P 500	8,915.	8,809.
97717X701 WISDOMTREE EUROPE HE	2,781.	2,260.
TOTALS	125,078.	125,507.

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION	COST/ FMV C OR F
73935S105 POWERSHARES DB COMMO	C
TOTALS	

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT
CTF ADJUSTMENT	128.
PARTNERSHIP ADJUSTMENT	1,139.
ROUNDING	10.
YE SALES ADJUSTMENT	415.
RECOVERY ADJUSTMENT	197.
TOTAL	1,889.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT
COST BASIS ADJUSTMENT	99.
INCOME ADJUSTMENT	10.
SECURITIES ADJUSTMENT	1,578.
TOTAL	1,687.

Schedule D Detail of Long-term Capital Gains and Losses

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
OTHER GAINS AND LOSSES					
35.274 AGGREGATE BOND CTF	07/31/2012	02/28/2015	605.00	612.00	-7.00
44.919 AGGREGATE BOND CTF	07/31/2012	08/31/2015	754.00	779.00	-25.00
7.331 EMERGING MARKETS STOCK COMMON TRUST FUND	01/14/2011	02/28/2015	352.00	342.00	10.00
30.506 EMERGING MARKETS STOCK COMMON	01/14/2011	03/31/2015	1,468.00	1,419.00	49.00
10.368 MID CAP VALUE CTF	11/30/2013	03/31/2015	315.00	322.00	-7.00
16.873 MID CAP VALUE CTF	10/31/2007	03/31/2015	513.00	482.00	31.00
22.583 SMALL CAP VALUE CTF	05/31/2013	02/28/2015	560.00	521.00	39.00
36.866 MID CAP GROWTH CTF	04/22/2005	03/31/2015	1,064.00	879.00	185.00
13.269 DIVIDEND INCOME COMMON TRUST	05/31/2013	11/30/2015	685.00	666.00	19.00
44.246 HIGH QUALITY CORE COMMON TRUST FUND	09/30/2013	02/28/2015	611.00	560.00	51.00
5.484 HIGH QUALITY CORE COMMON TRUST	09/30/2013	11/30/2015	76.00	70.00	6.00
54.02 STRATEGIC GROWTH COMMON TRUST	05/31/2013	02/28/2015	721.00	569.00	152.00
67.799 STRATEGIC GROWTH COMMON TRUST	05/31/2013	11/30/2015	907.00	765.00	142.00
TOTAL OTHER GAINS AND LOSSES			8,631.00	7,986.00	645.00
Totals			8,631.00	7,986.00	645.00

JSA
5F0970 1 000

GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS	-983.00	
TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)		-983.00

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS	2,875.00	
PARTNERSHIPS, TRUSTS, S CORPORATIONS	-1,139.00	
TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)		1,736.00

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
KATAHDIN AREA COUN BOY SCOUTS
ADDRESS:
PO BOX 1869
BANGOR, ME 04402-1869
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME:
SWEETSER
ADDRESS:
50 MOODY ST
SACO, ME 04072-1536
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 248.

RECIPIENT NAME:
BLUE HILL PUBLIC LIBRARY
ADDRESS:
5 PARKER POINT RD
BLUE HILL, ME 04614-6003
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
MAINE SEA COAST MISSION
ADDRESS:
127 WEST ST
BAR HARBOR, ME 04609-1430
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 312.

RECIPIENT NAME:
CASTINE COMMUNITY HOSP
ADDRESS:
PO BOX 198
CASTINE, ME 04421-0198
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 312.

RECIPIENT NAME:
FRIEND MEM PUB LIBRARY
ADDRESS:
PO BOX 57
BROOKLIN, ME 04616-0057
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
BLUE HILL MEMORIAL HOSP
ADDRESS:
PO BOX 1029
BLUE HILL, ME 04614-1029
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
BROOKLIN CEMETERY
ADDRESS:
PO BOX 151
BROOKLIN, ME 04616-0151
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 125.

RECIPIENT NAME:
NORTH BROOKLIN CEMETERY
ADDRESS:
140 HIGH ST
BROOKLIN, ME 04616-3130
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 125.

RECIPIENT NAME:
BANGOR THEOLOGICAL SEM
ADDRESS:
TWO COLLEGE CIRCLE, BOX 411
BANGOR, ME 04402
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME:
THE MAINE CHILDREN'S HOM
ADDRESS:
93 SILVER ST
WATERVILLE, ME 04901-5923
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME:
FIRST CONG CHURCH OF BLUE HILL
ADDRESS:
PO BOX 444
BLUE HILL, ME 04614-0444
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
FIRST BAPTIST CHURCH OF BROOKLIN
C/O ROXANNE SHERMAN - TREASURER
ADDRESS:
PO BOX 76
BROOKLIN, ME 04616-0076
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
MYSTIC VALLEY LODGE AF & AM
C/O ALAN HARPER JONES
ADDRESS:
19 ACADEMY ST
ARLINGTON, MA 02476-6433
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME:
CAMP ALLEN
ADDRESS:
56 CAMP ALLEN RD
BEDFORD, NH 03110-6606
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 125.

RECIPIENT NAME:
MASSACHUSETTS SPCA
ADDRESS:
350 S HUNTINGTON AVE
BOSTON, MA 02130-4803
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 125.

RECIPIENT NAME:
PERKINS SCHOOL FOR THE BLIND
ADDRESS:
175 NORTH BEACON ST
WATERTOWN, MA 02472-2751
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
ANIMAL RESCUE LEAGUE OF BOSTON
ADDRESS:
10 CHANDLER ST
BOSTON, MA 02116-5221
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 125.

RECIPIENT NAME:
HOME FOR LITTLE WANDERERS
ATTN CHARLES JORDAN
ADDRESS:
271 HUNTINGTON AVE
BOSTON, MA 02115-4506
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
ANDOVER NEWTON THEOLOGICAL SEM
ADDRESS:
210 HERRICK RD
NEWTON CENTRE, MA 02459-2243
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME:
WALKER MISSIONARY HOMES INC
ADDRESS:
144 HANCOCK ST
AUBURNDALE, MA 02466-2256
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 125.

RECIPIENT NAME:
BENEVOLENT FOUNDATION
SUPREME COUNCIL
ADDRESS:
PO BOX 519
LEXINGTON, MA 02420-0519
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 190.

RECIPIENT NAME:
COEUR DE LION COMM NO 34 KT
ADDRESS:
19A CROSBY DR STE 110
BEDFORD, MA 01730-1419
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 31.

RECIPIENT NAME:
CAMBRIDGE ROYAL ARCH CHAPTER
ATTN: TREASURER LOUIS DOMENECH
ADDRESS:
11 MEAD RD
ARLINGTON, MA 02474-2813
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
SIMON W ROBINSON LODGE AF & AM
C/O TREASURER
ADDRESS:
PO BOX 12
LEXINGTON, MA 02420-0001
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
RURAL CEMETERY OF SEDGEWICK
C/O SHARON FREETHEY
ADDRESS:
32 FOLLY RD
BROOKLIN, ME 04616-3100
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
ORIENT COUNCIL R&SMM
ATTN: TREASURER-DAVID W. HOOPER
ADDRESS:
4 MAUD GRAHAM CIR
BURLINGTON, MA 01803-3614
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 250.

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:
STARR COMMONWEALTH
ADDRESS:
13725 26 MILE RD
ALBION, MI 49224-9525
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 187.

RECIPIENT NAME:
KOINONIA FOUNDATION
ADDRESS:
1530 BOLLINGER RD
WESTMINSTER, MD 21157-7213
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
NC
AMOUNT OF GRANT PAID ..... 125.

RECIPIENT NAME:
KNIGHTS TEMPLAR EYE FOUNDATION
ADDRESS:
1033 LONG PRAIRIE RD STE 5
FLOWER MOUND, TX 75022-4230
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
UNRESTRICTED GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ..... 187.

TOTAL GRANTS PAID: 5,901.

FEDERAL FOOTNOTES

FORM 990-PF - PART VIII, LINE 1(B) - AVERAGE HOURS PER WEEK DEVOTED TO POSITION: THE COMPENSATION SHOWN ON THE RETURN THAT IS PAID TO BANK OF AMERICA, N.A. AS CORPORATE TRUSTEE IS NOT CALCULATED BASED UPON AN HOURLY RATE FOR TIME SPENT BY THE TRUSTEE; RATHER, BANK OF AMERICA'S COMPENSATION AS CORPORATE TRUSTEE IS CALCULATED USING A MARKET VALUE FEE SCHEDULE. THE TRUST OFFICER'S TIME SPENT PERFORMING ADMINISTRATIVE RESPONSIBILITIES FOR THIS FOUNDATION AVERAGES ONE HOUR PER WEEK. IN ADDITION, TIME IS SPENT BY OTHER STAFF MEMBERS FOR RECORDKEEPING, INVESTMENT MANAGEMENT, INCOME COLLECTION, RENDERING STATEMENTS AND ACCOUNTINGS, REGULATORY REPORTING, REGULATORY COMPLIANCE, AND TAX SERVICES.

Expenditure Report
Mystic Valley Lodge AF & AM

NAME OF TRUST: Eugene B. Hamilton Trust
ACCOUNT #:

To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for the Mystic Valley Lodge AF & AM. for the period of **January 1, 2015 through December 31, 2015** for a distribution totaling $249.61 ("distributed funds") received by the Northfield Observances, Inc We certify that the funds have been used exclusively for the charitable purposes set forth in the trust distribution agreement letter.

Attached is a report showing expenditures of the distributed funds during the fiscal year by amount and purpose.

No part of the distributed funds or interest earned on the funds were used for any of the following purposes:

(i) carrying on propaganda or attempting to influence legislation,
(ii) influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,
(iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Code, or
(iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Code

I further certify that our organization, has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant and that this organization has met its minimum required distribution for the most recently completed fiscal year. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: Sheldon Hamilton

Its Treasurer

Telephone Number. 781-641-2424 x1001

Date: 10/11/16

EXPENDITURE RESPONSIBILITY REPORT

Date of report. 10/11/16

Report period **January 1, 2015 through December 31, 2015**

Name and address of organization:
MYSTIC VALLEY LODGE AF+AM
19 ACADEMY ST
ARLINGTON, MA 02476

Amounts and dates of distributions received during the period of 1/1/15 through 12/31/15

Date	Amount
JAN, 2015	$208
NOV, 2015	41.61

Describe the uses of the distributed funds Attach additional pages, if needed)

SUPPORT A CHARITABLE CONTRIBUTION
FROM MV LODGE TO [redacted] DEMOLAY
[redacted]
YOUTH ORGANIZATION

Itemize all amounts spent from the distributed funds including salaries, travel and supplies (attach additional pages, if needed):

Date	Amount	Purpose
5/12/15	1250	Demolay

By: Thurdon Wilson

Its Treasurer

Date: 10/11/16

Expenditure Report
Koinonia Foundation

NAME OF TRUST: Eugene B. Hamilton Trust
ACCOUNT #:_____

To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for Koinonia Foundation for the period of **January 1, 2015 through December 31, 2015** for a distribution totaling $126.07 ("distributed funds") received by our organization. We certify that the funds have been used exclusively for the charitable purposes set forth in the trust distribution agreement letter.

Attached is a report showing expenditures of the distributed funds during the fiscal year by amount and purpose.

No part of the distributed funds or interest earned on the funds were used for any of the following purposes:

(i) carrying on propaganda or attempting to influence legislation,
(ii) influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,
(iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Code, or
(iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Code.

I further certify that our organization has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant and that this organization has met its minimum required distribution for the most recently completed fiscal year. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: Robin M. Mendley

Its

Telephone Number: 410-653-0001

Date: 10/1/15

Grants Distributed
1/1/2015 – 10/1/2015

- Baltimore Orchard Project - $1,000.00 to support it's educational Funky Fruit Campaign.
- Global Solace Inc.- $500.00 towards installing solar panels in a school in Tanzania.
- The African American Museum of Nassau County - $500.00 to a mural project
- Pulse Ministries - $1,000.00 toward transportation and meals for field trips for disadvantaged youths
- Morgan County Association for Food and Farms - $1,000.00 to plant a community garden.

Eugene B. Hamilton Trust, to make, execute and deliver on behalf of the organization all agreements, representations, receipts, reports and other instruments of every kind.

ACCEPTED AND AGREED TO:

Koinonia Foundation

Robin M. Madley - Treasurer
Board Chair (typed/printed)

Robin M. Madley 10/1/15
Board Chair (signature)/Date

Executive Director (typed/printed)

Executive Director (signature)/Date

Expenditure Report
Rural Cemetery of Sedgewick

NAME OF TRUST: Eugene B. Hamilton Trust
ACCOUNT #:_____

To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for Rural Cemetery of Sedgewick for the period of **January 1, 2015 through December 31, 2015** for a distribution totaling $189.10 ("distributed funds") received by our organization. We certify that the funds have been used exclusively for the charitable purposes set forth in the trust distribution agreement letter.

Attached is a report showing expenditures of the distributed funds during the fiscal year by amount and purpose.

No part of the distributed funds or interest earned on the funds were used for any of the following purposes:

(i) carrying on propaganda or attempting to influence legislation,
(ii) influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,
(iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Code, or
(iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Code.

I further certify that our organization has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant and that this organization has met its minimum required distribution for the most recently completed fiscal year. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: Pamela T Talbey

Its Secretary/Treasurer

Telephone Number: 207-354-4414

Date: 11/9/2015

EXPENDITURE RESPONSIBILITY REPORT

Date of report: 11/9/2015

Report period: January 1, 2015 through December 31, 2015

Name and address of organization:
Rural Cemetary Association
Pamela Tobey
443 Beach Road
Searsville, Maine 04673

Amounts and dates of distributions received during the period of January 1, 2015 through December 31, 2015:

Date	Amount
3/10/15	154.00
4/30/15	$135.00
5/6/15	336.00
09/15	31.21

Describe the uses of the distributed funds. Attach additional pages, if needed:

All funds are applied to the cost of grounds maintenance of the Rural Cemetary

Itemize all amounts spent from the distributed funds including salaries, travel and supplies (attach additional pages, if needed):

Date	Amount	Purpose
see above		

By: Pamela T Tobey

Its Secretary/Treasurer

Date: 11/9/2015

Eugene B. Hamilton Trust, to make, execute and deliver on behalf of the organization all agreements, representations, receipts, reports and other instruments of every kind.

ACCEPTED AND AGREED TO:

Rural Cemetery of Sedgewick

Barry C Closson

Board Chair (typed/printed)

Barry C Closson 11/9/15

Board Chair (signature)/Date

Rhoda Grant

Executive Director (typed/printed)

Rhoda Grant 11/09/15

Executive Director (signature)/Date

Expenditure Report
North Brooklin Cemetery

NAME OF TRUST: Eugene B. Hamilton Trust
ACCOUNT #:_____

To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for North Brooklin Cemetery for the period of **January 1, 2015 through December 31, 2015** for a distribution totaling $126.07 ("distributed funds") received by our organization. We certify that the funds have been used exclusively for the charitable purposes set forth in the trust distribution agreement letter.

Attached is a report showing expenditures of the distributed funds during the fiscal year by amount and purpose.

No part of the distributed funds or interest earned on the funds were used for any of the following purposes:

(i) carrying on propaganda or attempting to influence legislation,
(ii) influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,
(iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Code, or
(iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Code.

I further certify that our organization has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant and that this organization has met its minimum required distribution for the most recently completed fiscal year. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: Roger Hutchinson Jr.

Its President

Telephone Number: 207-359-8885

Date: 10/8/15

EXPENDITURE RESPONSIBILITY REPORT

Date of report: 10/8/15

Report period: January 1, 2015 through December 31, 2015

Name and address of organization:
North Brooklin Cemetery Ass.
[redacted] 140 High St.
Brooklin, Me 04616

Amounts and dates of distributions received during the period of January 1, 2015 through December 31, 2015:

Date	Amount
2015	$ 126.07

Describe the uses of the distributed funds. Attach additional pages, if needed:

mowing and upkeep of cemetary grounds
Raking and tree removal at cemetary.

Itemize all amounts spent from the distributed funds including salaries, travel and supplies (attach additional pages, if needed):

Date	Amount	Purpose
10/8/15	1440.10	upkeep of cemetery grounds.

By: Roger Hutchinson Sr

Its President

Date: 10/8/15

Eugene B. Hamilton Trust, to make, execute and deliver on behalf of the organization all agreements, representations, receipts, reports and other instruments of every kind.

ACCEPTED AND AGREED TO:

North Brooklin Cemetery Ass.
North Brooklin Cemetery
Roger R. Hutchinson Jr.
Board Chair (typed/printed)
Roger R. Hutchinson Jr. 10/8/15
Board Chair (signature)/Date

_____
Executive Director (typed/printed)

_____
Executive Director (signature)/Date

Expenditure Report
Cambridge Royal Arch Chapter

NAME OF TRUST: Eugene B Hamilton Trust
ACCOUNT #

To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for the Cambridge Royal Arch Chapter for the period of **January 1, 2015 through December 31, 2015** for a distribution totaling $187.21 ("distributed funds") received by the Northfield Observances, Inc. We certify that the funds have been used exclusively for the charitable purposes set forth in the trust distribution agreement letter.

Attached is a report showing expenditures of the distributed funds during the fiscal year by amount and purpose.

No part of the distributed funds or interest earned on the funds were used for any of the following purposes:

(i) carrying on propaganda or attempting to influence legislation,
(ii) influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,
(iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Code, or
(iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Code.

I further certify that our organization, has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant and that this organization has met its minimum required distribution for the most recently completed fiscal year. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: [signature]
Its Treasurer

Telephone Number. 617-872-6677

Date: 10/30/16

Expenditure Report
Couer de Lion Commandery No. 34

NAME OF TRUST: Eugene B. Hamilton Trust
ACCOUNT #:_____

To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for Couer de Lion Commandery No. 34 for the period of **January 1, 2015 through December 31, 2015** for a distribution totaling $189.10 ("distributed funds") received by our organization. We certify that the funds have been used exclusively for the charitable purposes set forth in the trust distribution agreement letter.

Attached is a report showing expenditures of the distributed funds during the fiscal year by amount and purpose.

No part of the distributed funds or interest earned on the funds were used for any of the following purposes:

(i) carrying on propaganda or attempting to influence legislation,
(ii) influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,
(iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Code, or
(iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Code.

I further certify that our organization has not diverted any portion of the distributed funds from the purpose of the grant, that this organization has complied with the terms of the grant and that this organization has met its minimum required distribution for the most recently completed fiscal year. I am authorized to sign this report on behalf of the trust beneficiary. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: _____

Its Trustee

Telephone Number: 978-456-9710

Date: 10/20/2016